## CRANE OPERATOR'S MONTHLY INSPECTION REPORT

(This form is to be filled using ink or ballpoint pen. Do not use pencil.)

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Crane/Hoist Number	Year	Inspection Record Number
Manufacturer	Location	Girder Control
Type Travel	Div/Sec	
Style Crane Contact	Lift Ext	Span Cap MS#
Chain/Rope	Diameter	Length
Chain Size		Cable Length
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Inspection Date	Inspector	Ins. Upper Limit Sw.	Ins. Lower Limit Sw.	Motion Inspection	Mechanical Observation	Lower Block Assembly	Hoists

Note: Observations to cover such items as:

- 1) Pendant Markings
- 2) Smooth quiet operation of controls and operating mechanisms such as: running sheaves, brakes, gear boxes and wheel assemblies.
- 3) Hoist upper limit switch.
- 4) Lines, valves and other parts of air systems for leakage.
- 5) Hoist braking for proper operation.
- 6) Observations during operation should note deficiencies such as loose or frayed lines related to mechanical or electrical component conditions.

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## **Hook Inspection**

Note: Dimension "A" is the reference dimension. Dimension "B" shall not exceed "A" more than 15%

Meas. A ———	L H
Meas. B	10 Ja 19
Twist ——	(N)

Inspect Travel Motions	Electrical Systems Observation	Pendant Inspection	Repairs Required YES/NO	Description and/or Requirements	Inspection Date

## For additional details refer to OSHA 1910 Section 179

Return a copy of this form to the crane management office when the form is completed.

Additional Remarks:		